PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

50195-376

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			18				ſ	RATE	FEE	[RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS 18			18 min	us 20=	*	0		X\$ 9=		OR	X\$18=	Ω	
INDEPENDENT CLAIMS 2 minus :				nus 3 =	*	U		X42=		OR	X84=	O	
MULTIPLE DEPENDENT CLAIM PRESENT							t	+140=		OR	+280=	0	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	L	TOTAL		OR	TOTAL	250	
CLAIMS AS AMENDED - PAF					T II					1	OTHER		
,	.	(Column 1)		(Colur	nn 2) (Column 3)			SMALL E	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	Ī	X42=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM			+140=		OR	+280=		
								TOTAL		l l	TOTAL		
(Column 1) (Column 2) (Column 3)								DDIT. FEE	·	lon .	ADDIT. FEE	-:	
В		CLAIMS		HIGH	IEST		Г	· ·	ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO	OUSLY -	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	+140=			+280=		
								TOTAL		OR	TOTAL		
							A	ODIT. FEE		OR	ADDIT. FEE		
_		(Column 1) CLAIMS		(Colu		(Column 3)				ì		,	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	1	X42=			X84=		
5	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		!			OR			
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280⇒		
** If the entry in column 1 is less than the entry in column 2, write 0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE													
		nber Previously Pa					er fou	nd in the app	oropriate bo	x in co	lumn 1.		